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2634

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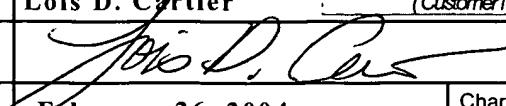
Total Number of Pages in This Submission

|                         |                   |
|-------------------------|-------------------|
| Application / Conf. No. | 09/684,528 / 1500 |
| Filing Date             | October 06, 2000  |
| First Named Inventor    | Andrew K. Percey  |
| Examiner Name           | Sam K. Ahn        |
| Art Unit                | 2634              |
| Patent No.              | RECEIVED          |
| Attorney Docket Number  | MAR 08 2004       |

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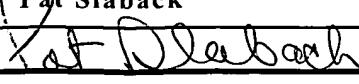
| ENCLOSURES (check all that apply)  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Amendment / Reply <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary Amendment</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavit(s)/declaration(s)</li> </ul> <ul style="list-style-type: none"> <li><input type="checkbox"/> Extension of Time Request</li> <li><input type="checkbox"/> Change Status to LARGE ENTITY</li> <li><input type="checkbox"/> Express Abandonment Request</li> <li><input type="checkbox"/> Information Disclosure Statement</li> <li><input type="checkbox"/> Substitute PTO-1449(s)<br/>IDS by Applicant (PTO/SB/08A)</li> <li><input type="checkbox"/> Certified Copy of Priority<br/>Document(s)</li> <li><input type="checkbox"/> Response to Missing Parts/<br/>Incomplete Application           <ul style="list-style-type: none"> <li><input type="checkbox"/> Response to Missing<br/>Parts under 37 CFR<br/>1.52 or 1.53</li> </ul> </li> </ul> | <input type="checkbox"/> Assignment Papers<br>(with Recordation Cover Sheet)<br><input type="checkbox"/> Declaration / Oath<br><input checked="" type="checkbox"/> Drawing(s) Amended<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition -<br><input type="checkbox"/> To Convert a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence<br>Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund | <input type="checkbox"/> After Allowance Communication<br>to<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input checked="" type="checkbox"/> Other Enclosure(s)<br>(please identify below):<br><div style="border: 1px solid black; padding: 5px; width: 150px; height: 40px; margin-top: 10px;">Replacement Sheets for Figures<br/>2A., 2B, 2C</div> |
| Remarks  |   |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

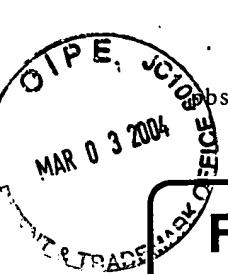
|                            |   |  |
|----------------------------|---|--|
| Firm or<br>Customer Number | 24309<br>(Customer Number)  |  |
| Attn:                      | Lois D. Cartier   | Reg. Number 40,941   |
| Signature                  |  |  |
| Date                       | February 26, 2004   | Charge any additional fees required/credit any overpayment<br>to our Deposit Account Number: 24-0040 |

## CERTIFICATE OF MAILING

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| Typed or Printed Name | Pat Slaback   |                   |  |
| Signature             |  |                   |  |
|                       | Date  | February 26, 2004 |  |

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.



# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision

**TOTAL AMOUNT OF PAYMENT** (\$ 172.00)

Complete if Known

|                         |                  |   |
|-------------------------|------------------|---|
| Application / Conf. No. | 09/684,528       | / |
| Filing Date             | October 6, 2000  |   |
| First Named Inventor    | Andrew K. Percey |   |
| Examiner Name           | Sam K. Ahn       |   |
| Art Unit                | 2634             |   |
| Attorney Docket No.     | X-444-2P-2 US    |   |

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| METHOD OF PAYMENT (check one)   |                        |  |              | FEE CALCULATION (continued)  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
|---|------------------------|--|--------------|--|-------------|--------------------------------------|--------------------------|-----------------|------------------------|------------------------|--------------|------|-------------------------------------|-----------------------------------|------|------|--|---------------------------------------|------|-------|---|---|------|------|--|---|------|--------------|---|------|------|--------------------------|--|--|------|-----|---|--|--------------------------|-----|--|--|------|-------|---|--|------|-------|--|--|------|-----|------------------|--|------|-----|--|--|------|-----|--------------------------|--|------|-------|---|--|------|-----|----------------------------------|--|------|-------|------------------------------------|--|------|-------|--------------------------------|--|------|-----|-------------------------------|--|------|----|---|--|------|-----|---|--|------|----|--|--|------|-----|---|--|------|-----|--|--|------|-----|---|--|---------------------------|--|--|--|--------------|--|------|--|--------------|--|--|------|--|--------|--|------|--|--|-----------------------------------|--|--|--|-------------------|--|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees any additional fees required, and credit any over payments to:</p> <p><input checked="" type="checkbox"/> Deposit Account</p> <p>Deposit Account Number <b>24-0040</b></p> <p>Deposit Account Name <b>XILINX, INC.</b></p>   |                        |  |              | <p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 5px;">Large Entity Fee<br/>Code</th> <th style="text-align: left; padding: 5px;">(\$)</th> <th style="text-align: left; padding: 5px;">Fee Description</th> <th style="text-align: left; padding: 5px;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,330</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>770</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>770</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td colspan="4" style="text-align: left; padding: 5px;">Other fee (specify) _____</td></tr> <tr> <td colspan="2" style="text-align: left; padding: 5px;">SUBTOTAL (1)</td> <td colspan="2" style="text-align: left; padding: 5px;">(\$)</td> <td colspan="3" style="text-align: left; padding: 5px;">SUBTOTAL (2)</td> </tr> <tr> <td colspan="2" style="text-align: left; padding: 5px;">(\$)</td> <td colspan="2" style="text-align: left; padding: 5px;">172.00</td> <td colspan="3" style="text-align: left; padding: 5px;">(\$)</td> </tr> <tr> <td colspan="4" style="text-align: left; padding: 5px;">*Reduced by Basic Filing Fee Paid</td> <td colspan="3" style="text-align: left; padding: 5px;">SUBTOTAL (3) (\$)</td> </tr> </tbody> </table> |             |                                      | Large Entity Fee<br>Code | (\$)            | Fee Description        | Fee Paid               | 1051         | 130  | Surcharge - late filing fee or oath |                                   | 1052 | 50   | Surcharge - late provisional filing fee or cover sheet |                                       | 1812 | 2,520 | For filing a request for ex parte reexamination |   | 1804 | 920* | Requesting publication of SIR prior to Examiner action |   | 1805 | 1,840*       | Requesting publication of SIR after Examiner action |      | 1251 | 110                      | Extension for reply within first month |  | 1252 | 420 | Extension for reply within second month |  | 1253                     | 950 | Extension for reply within third month |  | 1254 | 1,480 | Extension for reply within fourth month |  | 1255 | 2,010 | Extension for reply within fifth month |  | 1401 | 330 | Notice of Appeal |  | 1402 | 330 | Filing a brief in support of an appeal |  | 1403 | 290 | Request for oral hearing |  | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | Petition to revive - unavoidable |  | 1453 | 1,330 | Petition to revive - unintentional |  | 1501 | 1,330 | Utility issue fee (or reissue) |  | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | Petitions related to provisional applications |  | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 770 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 770 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 | 770 | Request for Continued Examination (RCE) |  | Other fee (specify) _____ |  |  |  | SUBTOTAL (1) |  | (\$) |  | SUBTOTAL (2) |  |  | (\$) |  | 172.00 |  | (\$) |  |  | *Reduced by Basic Filing Fee Paid |  |  |  | SUBTOTAL (3) (\$) |  |  |
| Large Entity Fee<br>Code  | (\$)                   | Fee Description  | Fee Paid     |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1051  | 130                    | Surcharge - late filing fee or oath  |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1052  | 50                     | Surcharge - late provisional filing fee or cover sheet                     |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1812  | 2,520                  | For filing a request for ex parte reexamination                            |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1804  | 920*                   | Requesting publication of SIR prior to Examiner action                     |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1805  | 1,840*                 | Requesting publication of SIR after Examiner action                        |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1251  | 110                    | Extension for reply within first month                                     |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1252  | 420                    | Extension for reply within second month                                    |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1253  | 950                    | Extension for reply within third month                                     |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1254  | 1,480                  | Extension for reply within fourth month                                    |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1255  | 2,010                  | Extension for reply within fifth month                                     |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1401  | 330                    | Notice of Appeal   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1402  | 330                    | Filing a brief in support of an appeal                                     |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1403  | 290                    | Request for oral hearing   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1451  | 1,510                  | Petition to institute a public use proceeding                              |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1452  | 110                    | Petition to revive - unavoidable   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1453  | 1,330                  | Petition to revive - unintentional   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1501  | 1,330                  | Utility issue fee (or reissue)   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1460  | 130                    | Petitions to the Commissioner  |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1807  | 50                     | Petitions related to provisional applications                              |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1806  | 180                    | Submission of Information Disclosure Stmt                                  |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 8021  | 40                     | Recording each patent assignment per property (times number of properties) |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1809  | 770                    | Filing a submission after final rejection (37 CFR 1.129(a))                |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1810  | 770                    | For each additional invention to be examined (37 CFR 1.129(b))             |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1801  | 770                    | Request for Continued Examination (RCE)                                    |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| Other fee (specify) _____   |                        |  |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| SUBTOTAL (1)  |                        | (\$)   |              | SUBTOTAL (2)   |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| (\$)  |                        | 172.00   |              | (\$)   |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| *Reduced by Basic Filing Fee Paid   |                        |  |              | SUBTOTAL (3) (\$)  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE   |                        |  |              | SUBMITTED BY   |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 5px;">Large Entity<br/>Fee<br/>Code</th> <th style="text-align: left; padding: 5px;">Fee<br/>(\$)</th> <th style="text-align: left; padding: 5px;">Fee Description</th> <th style="text-align: left; padding: 5px;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>330</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>510</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>Reissue filing fee</td><td></td></tr> <tr><td>105</td><td>160</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="2" style="text-align: left; padding: 5px;">SUBTOTAL (1)</td><td colspan="2" style="text-align: left; padding: 5px;">(\$)</td></tr> </tbody> </table>   |                        |  |              | Large Entity<br>Fee<br>Code  | Fee<br>(\$) | Fee Description                      | Fee Paid                 | 1001            | 770                    | Utility filing fee     |              | 1002 | 330                                 | Design filing fee                 |      | 1003 | 510  | Plant filing fee                      |      | 1004  | 770   | Reissue filing fee                                |      | 105  | 160  | Provisional filing fee                                    |      | SUBTOTAL (1) |   | (\$) |      | Complete (if applicable) |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| Large Entity<br>Fee<br>Code   | Fee<br>(\$)            | Fee Description  | Fee Paid     |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1001  | 770                    | Utility filing fee   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1002  | 330                    | Design filing fee  |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1003  | 510                    | Plant filing fee   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1004  | 770                    | Reissue filing fee   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 105   | 160                    | Provisional filing fee   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| SUBTOTAL (1)  |                        | (\$)   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 5px;">Large Entity<br/>Fee<br/>Code</th> <th style="text-align: left; padding: 5px;">Fee<br/>(\$)</th> <th style="text-align: left; padding: 5px;">Fee Description</th> <th style="text-align: left; padding: 5px;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>**Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="2" style="text-align: left; padding: 5px;">SUBTOTAL (2)</td><td colspan="2" style="text-align: left; padding: 5px;">(\$)</td> <td colspan="3" style="text-align: left; padding: 5px;">SUBMITTED BY</td> </tr> <tr> <td colspan="2" style="text-align: left; padding: 5px;">(\$)</td> <td colspan="2" style="text-align: left; padding: 5px;">172.00</td> <td colspan="3" style="text-align: left; padding: 5px;">Complete (if applicable)</td> </tr> </tbody> </table> |                        |  |              | Large Entity<br>Fee<br>Code  | Fee<br>(\$) | Fee Description                      | Fee Paid                 | 1202            | 18                     | Claims in excess of 20 |              | 1201 | 86                                  | Independent claims in excess of 3 |      | 1203 | 290  | Multiple dependent claim, if not paid |      | 1204  | 86  | **Reissue independent claims over original patent |      | 1205 | 18   | **Reissue claims in excess of 20 and over original patent |      | SUBTOTAL (2) |   | (\$) |      | SUBMITTED BY             |  |  | (\$) |     | 172.00                                  |  | Complete (if applicable) |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| Large Entity<br>Fee<br>Code   | Fee<br>(\$)            | Fee Description  | Fee Paid     |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1202  | 18                     | Claims in excess of 20   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1201  | 86                     | Independent claims in excess of 3  |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1203  | 290                    | Multiple dependent claim, if not paid                                      |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1204  | 86                     | **Reissue independent claims over original patent                          |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| 1205  | 18                     | **Reissue claims in excess of 20 and over original patent                  |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| SUBTOTAL (2)  |                        | (\$)   |              | SUBMITTED BY   |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| (\$)  |                        | 172.00   |              | Complete (if applicable)   |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 5px;">Name (Print/Type)</th> <th style="text-align: left; padding: 5px;">Signature</th> <th style="text-align: left; padding: 5px;">Registration No.<br/>(Attorney/Agent)</th> <th style="text-align: left; padding: 5px;">Telephone</th> </tr> </thead> <tbody> <tr> <td>Lois D. Cartier</td> <td><i>Lois D. Cartier</i></td> <td>40,941</td> <td>720-652-3733</td> </tr> <tr> <td colspan="2"></td> <td colspan="2" style="text-align: left; padding: 5px;">Date</td> </tr> <tr> <td colspan="2"></td> <td colspan="2" style="text-align: left; padding: 5px;">02-26-2004</td> </tr> </tbody> </table>  |                        |  |              | Name (Print/Type)  | Signature   | Registration No.<br>(Attorney/Agent) | Telephone                | Lois D. Cartier | <i>Lois D. Cartier</i> | 40,941                 | 720-652-3733 |      |                                     | Date                              |      |      |  | 02-26-2004                            |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| Name (Print/Type)   | Signature              | Registration No.<br>(Attorney/Agent)                                       | Telephone    |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
| Lois D. Cartier   | <i>Lois D. Cartier</i> | 40,941   | 720-652-3733 |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
|   |                        | Date   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |
|   |                        | 02-26-2004   |              |  |             |                                      |                          |                 |                        |                        |              |      |                                     |                                   |      |      |  |                                       |      |       |   |   |      |      |  |   |      |              |   |      |      |                          |  |  |      |     |   |  |                          |     |  |  |      |       |   |  |      |       |  |  |      |     |                  |  |      |     |  |  |      |     |                          |  |      |       |   |  |      |     |                                  |  |      |       |                                    |  |      |       |                                |  |      |     |                               |  |      |    |   |  |      |     |   |  |      |    |  |  |      |     |   |  |      |     |  |  |      |     |   |  |                           |  |  |  |              |  |      |  |              |  |  |      |  |        |  |      |  |  |                                   |  |  |  |                   |  |  |